The National Center on Advancing Person-Centered Practices and Systems

Bevin Croft, MPP, PhD, NCAPPS Co-Director

September 5, 2019

NCAPPS

NCAPPS OVERVIEW

The goal of NCAPPS is to promote systems change that makes person-centered principles not just an aspiration but a reality in the lives of people across the lifespan.

3

What is person-centered thinking, planning, and practice?

Person-centered *thinking*

- A foundational principle requiring consistency in language, values, and actions
- The person and their loved ones are experts in their own lives
- Equal emphasis on quality of life, well-being, and informed choice

Person-centered *planning*

- A methodology that identifies and addresses the preferences and interests for a desired life and the supports (paid and unpaid) to achieve it
- Directed by the person, supported by others selected by the person

Person-centered *practices*

- Alignment of services and systems to ensure the person has access to the full benefits of community living
- Service delivery that facilitates the achievement of the person's desired outcomes

NCAPPS Leadership Team

Administration for Community Living (ACL):

- Shawn Terrell
- Serena Lowe
- Thom Campbell
- Dana Fink
- Joseph Lugo

**Centers for Medicare & Medicaid Services (CMS)**

- Amanda Hill
- Melissa Harris

Human Services Research Institute (HSRI):

- Co-Directors - Alixe Bonardi and Bevin Croft
- PAL-Group Coordinator – Nicole LeBlanc
- Project Coordinator – Miso Kwak
- TA Leads - Yoshi Kardell, Jami Petner-Arrey, Teresita Camacho-Gonsalves, Alena Vasquez

National Organization Partners

- National Association of State Head Injury Administrators (NASHIA)

- National Association of States United for Aging and Disabilities (NASUAD)

- National Association of State Directors of Developmental Disabilities Services (NASDDDS)

- National Association of State Mental Health Program Directors (NASMHPD)

- National Association of County Behavioral Health and Developmental Disabilities Directors (NACBHDD)

- National Association of Medicaid Directors (NAMD)
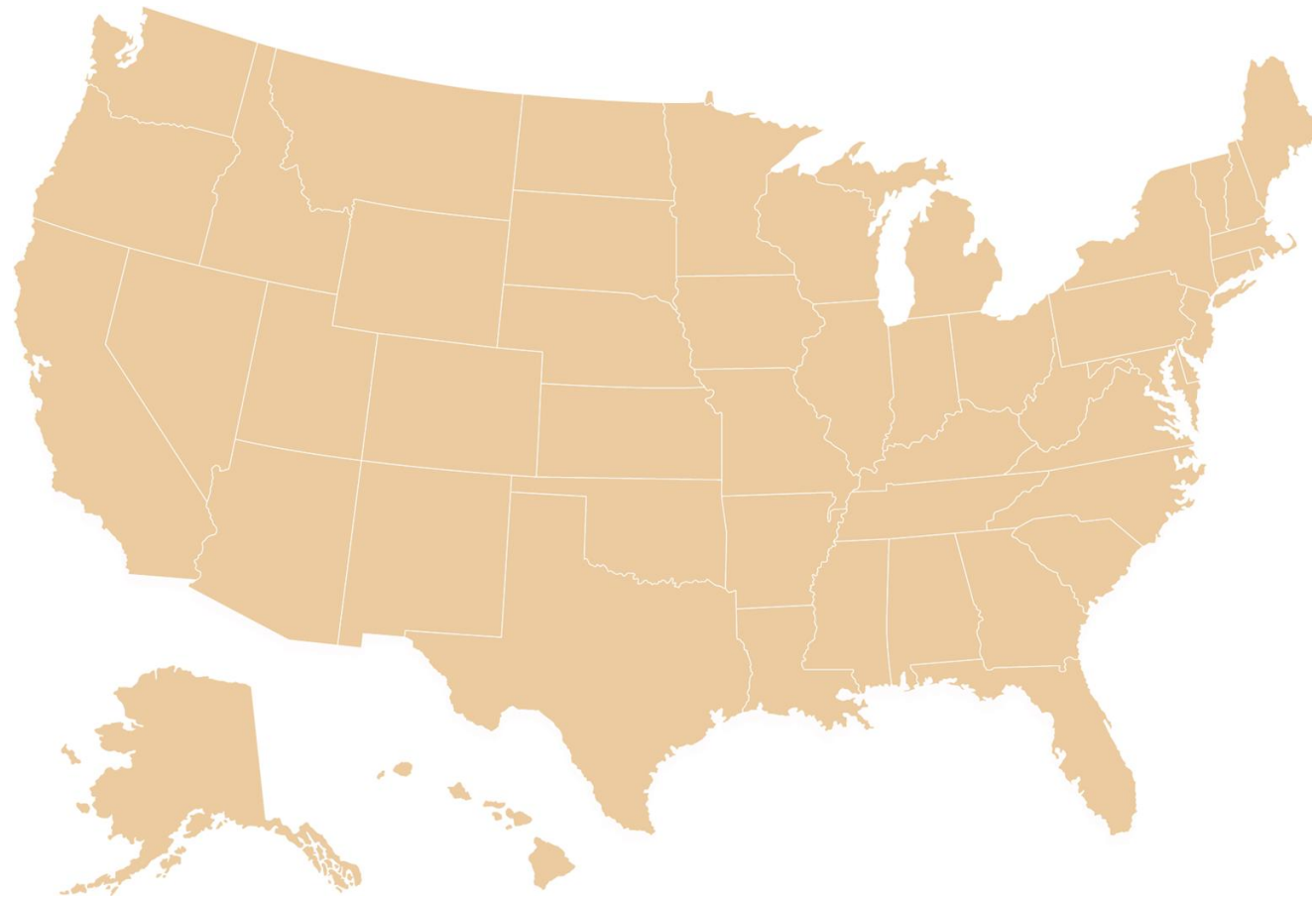
Subject Matter Experts

- Georgetown National Center for Cultural Competence

- Support Development Associates

- University of Missouri Kansas City Institute for Human Development

- Independent Living Research Utilization and the National Center for Aging and Disability

- Mission Analytics

- Applied Self Direction

- Collective Insight

- Eden Alternative

- Pioneer Network

- Live & Learn, Inc.

- Joe Caldwell, PhD

- Suzanne Crisp

- Mark Friedman, PhD

- Janis Tondora, PsyD

…and others

Person-Centered Advisory and Leadership Group (PAL-Group)

- Majority are people with direct lived experience of navigating HCBS systems

- Membership built with a strong focus on diversity of perspectives, experiences, and backgrounds

- Promotes and actualizes participant engagement in all NCAPPS components and activities

- Meets twice a year, plus additional ad hoc meetings and communications

- As subject matter experts, members will contribute to webinars, resource development

" To be person-centered means to function in a way that creates a culture where staff and providers presume competence, have high expectations and embrace the dignity of risk. Learning to "Let Go" is one thing we must strive for as a system. By doing this it will support people with disabilities to live the DREAM and experience life to the fullest.
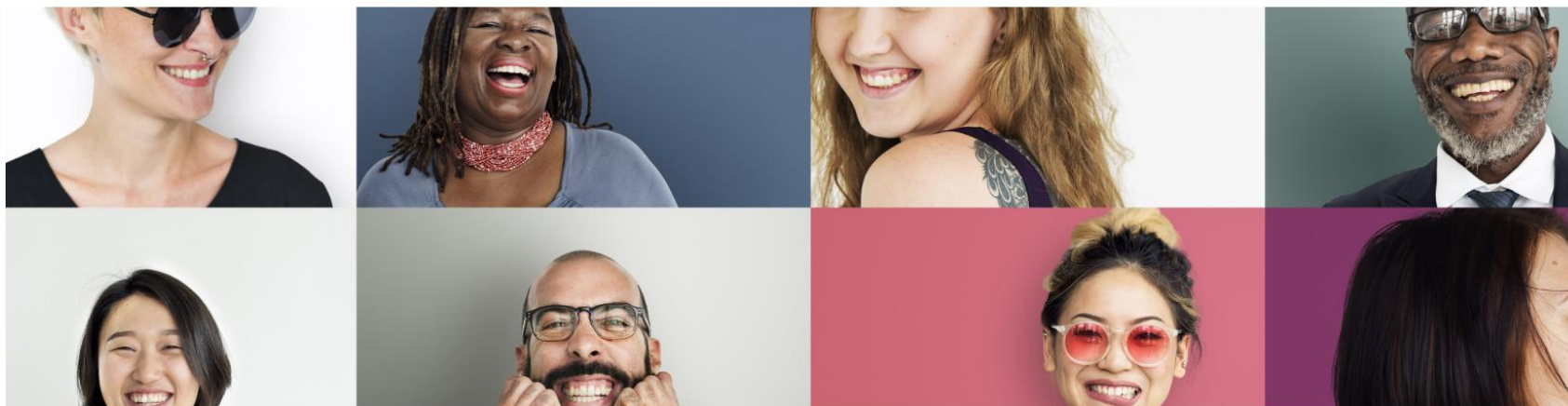
Nicole LeBlanc – PAL-Group Coordinator

Our Website

ncapps.acl.gov

NCAPPS

HOME   ABOUT NCAPPS   TECHNICAL ASSISTANCE   RESOURCES   LEARNING COLLABORATIVES

National Center on Advancing Person-Centered Practices and Systems

Transforming how we think, plan, and practice

NCAPPS Webinars

- Delivered by national experts and people with lived experience

- Coordinated and hosted by HSRI

- Free and open to the public

- Topics derived from technical assistance and priorities identified by the PAL-Group

- All webinars recorded and archived on our website ncapps.acl.gov

July 2019 Webinar
Pieces of the Same Puzzle: The Role of Culture in Person-Centered Thinking, Planning, and Practice

August 2019 Webinar:
Considering Brain Injury: Why Being Brain Injury–Informed Is a Critical Component of Person-Centered Thinking, Planning, and Practice

September Webinar: Microboards 101: An Introduction to a Person-Centered Solution Offering Full Accountability, Active Community Support, and Lifelong Continuity of Care
*Monday, September 16th, 2:00pm to 3:30pm Eastern*
To register, visit:
https://zoom.us/webinar/register/WN_qXFYpdO4R3i_NgA6umB6_g

Learning Collaboratives

Goal: Promote peer-to-peer learning to accelerate improvement efforts

- Structured group work with support from subject matter experts

- 12-24 months duration, depending on topic and improvement framework

- Membership open to technical assistance recipients and other system stakeholders with expressed interest
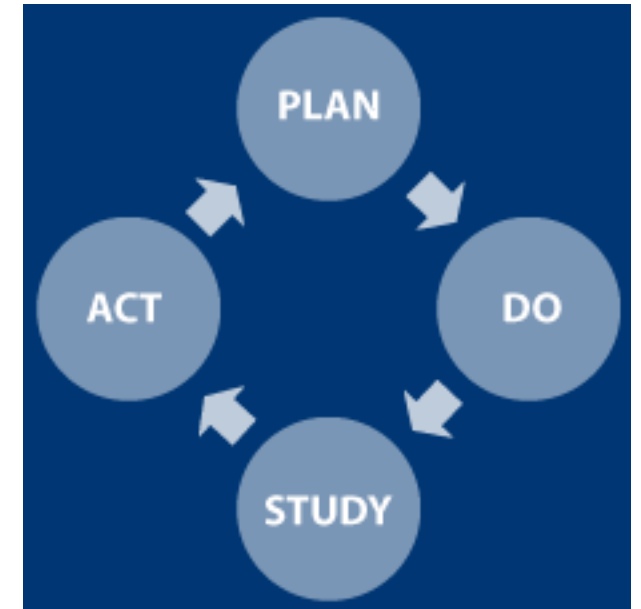
Learning Collaborative Topics

- Person-Centered Thinking, Planning, and Practice for People with Brain Injury [FALL 2019]

- Beyond Compliance: Enhancing Person-Centered Thinking, Planning, and Practice in Alignment with the HCBS Final Rule [SPRING 2020]

- Tribal Adaptations to Person-Centered Thinking, Planning, and Practice [FALL 2020]

- In the Driver's Seat: Realizing the Promise of Self-Direction [TBD]

- Amplifying the Voice of Lived Experience in Human Service Systems [TBD]

NCAPPS Technical Assistance Overview

Goal: *Support systems change efforts so the participant and family are at the center of thinking, planning, and practice*

- Available to up to 15 States, Tribes, or Territories each year

- Up to 100 hours per year for three years

- Delivered by national experts based on a detailed technical assistance plan

Technical Assistance Expectations

With HSRI support, selected technical assistance recipients:

1

Develop **concrete goals and objectives** based on one or more technical assistance domains (practice, policy, payment, participant engagement)

2

Create an **evaluation plan** for collecting, analyzing, and reporting whether and how each technical assistance goal will be met

3

Establish **strategies for meaningful participant and family engagement** in the technical assistance process and all systems change efforts

Selected States and Lead Agencies

State	Lead Agency
Alabama	Alabama Department of Mental Health (DMH)
Colorado	Colorado Department of Health Care Policy and Financing (HCPF)
Connecticut	Connecticut Department of Rehabilitation Services (DORS) State Unit on Aging
Georgia	Georgia Department of Human Services (DHS) Division of Aging Services (DAS)
Hawaii	Hawaii Department of Human Services (DHS) Med-QUEST Division
Idaho	Idaho Department of Health and Welfare, Division of Medicaid
Kentucky	Kentucky Department for Aging and Independent Living (DAIL)
Montana	Montana Department of Public Health and Human Services (DPHHS) Senior and Long Term Care
North Dakota	North Dakota Department of Human Services (DHS)
Ohio	Ohio Department of Medicaid (ODM)
Oregon	Oregon Department of Human Services (DHS) Aging and People with Disabilities (APD)
Pennsylvania	Pennsylvania Department of Aging (DOA) Aging and Disability Resource Office
Texas	Medicaid and CHIP/ Policy and Program Development/ Texas Health and Human Services
Utah	Utah Division of Services for People with Disabilities (DSPD)
Virginia	Virginia Department for Aging and Rehabilitative Services (DARS)

Goal 1: By March 31, 2020, DSPD will identify and test two specific strategies to support greater levels of self-advocate, service user, and family engagement.

1. Map existing **engagement strategies** already in place and their strengths and opportunities for improvement (e.g., existing vs. intended target groups, focus, frequency, accommodations, feedback loop).Identify and secure engagement with all relevant stakeholders, including service users and families

2. Using the Asset Map, identify **two new engagement strategies** to test.
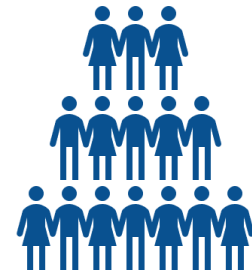
Goal 2: By September 30, 2019, DSPD will create a draft Communications Strategy that outlines a plan for increasing stakeholder buy-in and awareness of person-centered thinking, planning, and practice.

1. Draft a **Communications Strategy** for increasing stakeholder **buy-in and awareness of person-centered practice**. The Communications Strategy will detail regular and ongoing communications with service users and families and providers, identify multiple methods of communication, and strategies for measuring the effectiveness of the communications strategy so that it can be refined over time.

Goal 3: By September 30, 2020, ensure that person-centered thinking and planning are translated into practice through revised Person-Centered Support Planning standards and procedures.

1. Develop an **outline for a user manual** of the PCSP process.

2. Identify a suite of potential **person-centered planning tools** (including pre-planning tools) to be used in the PCSP process.

3. Create a **draft protocol** for integrating the use of those tools into the PCSP process and electronic health record.
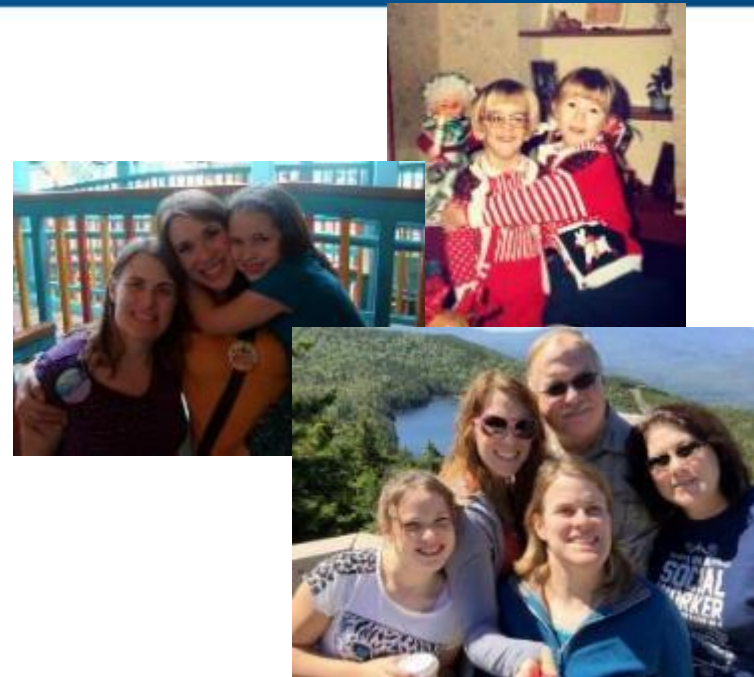
Jenny Turner, LCSW

- Sibling of two sisters, one who is in her 30s with a disability

- Licensed as a Clinical Social Worker

- Formerly a Support Coordinator and Director of a Provider Agency

- Senior Research Associate, UMKC Institute for Human Development

University of Kansas City Institute for Human Development, UCEDD conducts and collaborates on a wide variety of **applied research projects to develop, implement, and evaluate new ideas and promising practices** that support **healthy, inclusive communities.**

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Human Development
Charting the LifeCourse Nexus

Exchange

- Access to Resources and Tools
- Training
- Technical Assistance
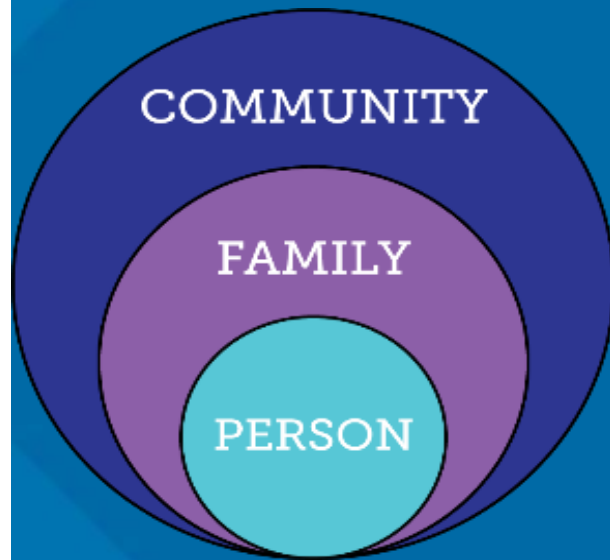
Build

- Innovate and Enhance
- Develop
- Research

Collaborate

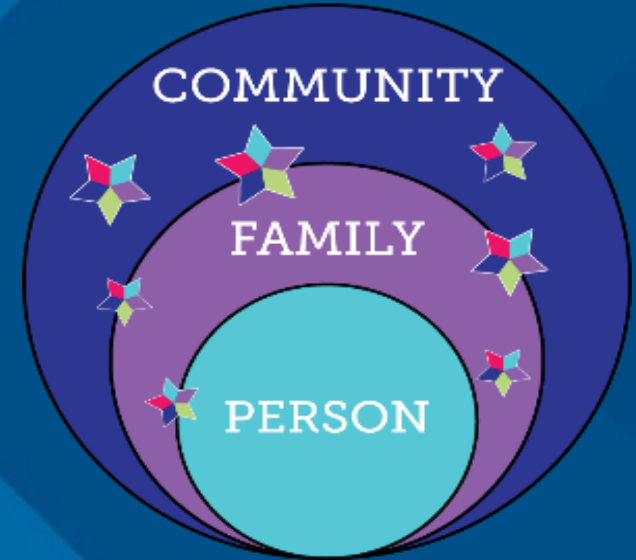- Network and Connect
- Share Learning
- Share Stories

Services and Supports are Evolving

Everyone exists within the context of family and community

Traditional Disability Services

Integrated Services and Supports within context of person, family and community

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Charting the LifeCourse Nexus

Joining Forces for a New Vision

1950s Mom------------Parent-----Family Movement

1970s Self-Advocacy and Independent Living Movements (Nothing about me, without me!)

2000s Siblings Movement

1960s Medicaid and Medicare Established
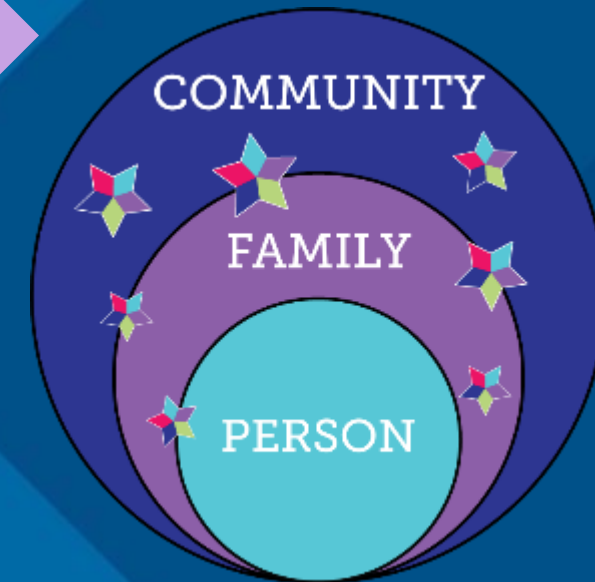
1980s Medicaid Waiver (Community Supports)

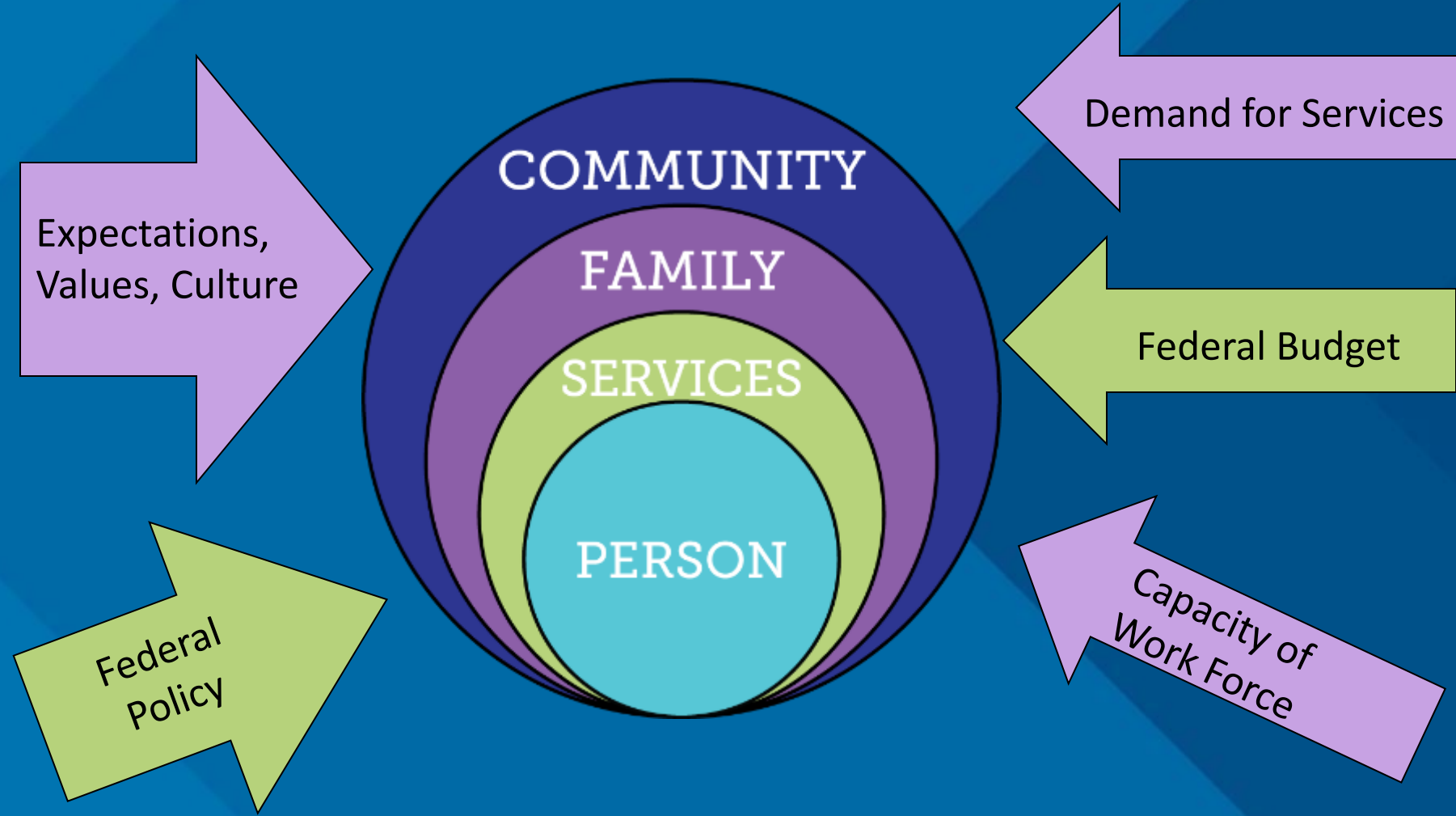2010s Affordable Care Act

1970s Rehab Act: 504 Plans
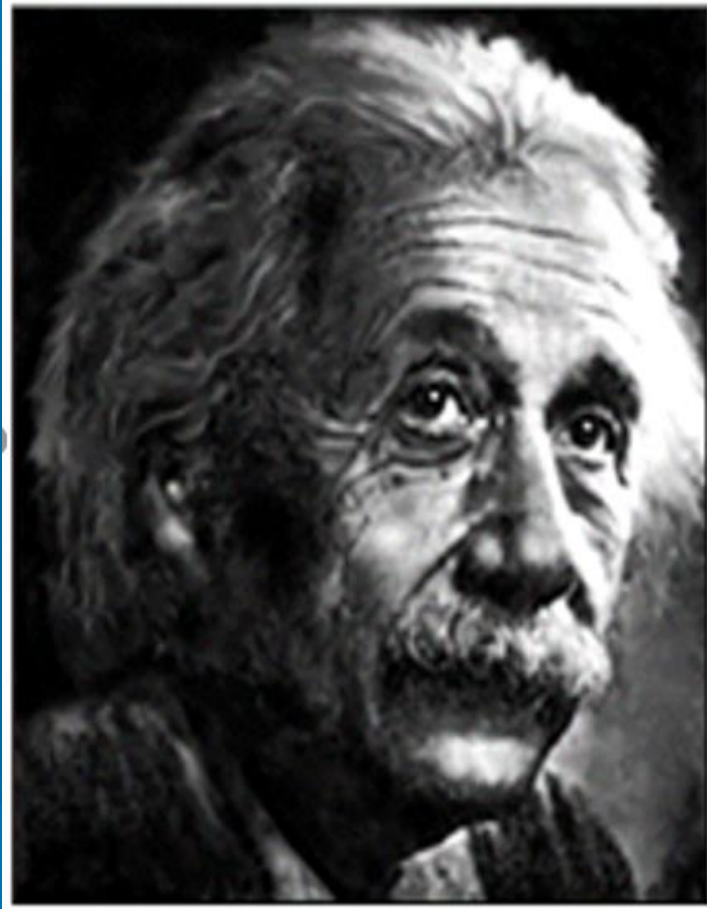
1975s Education for All Children

1990s IDEA and ADA

2000's Community and Society

COMMUNITY

FAMILY

PERSON

Current Reality of Services and Supports

The significant problems we face can not be solved at the same level of thinking we were at when we created them.

Albert Einstein

Type of Change that is Needed
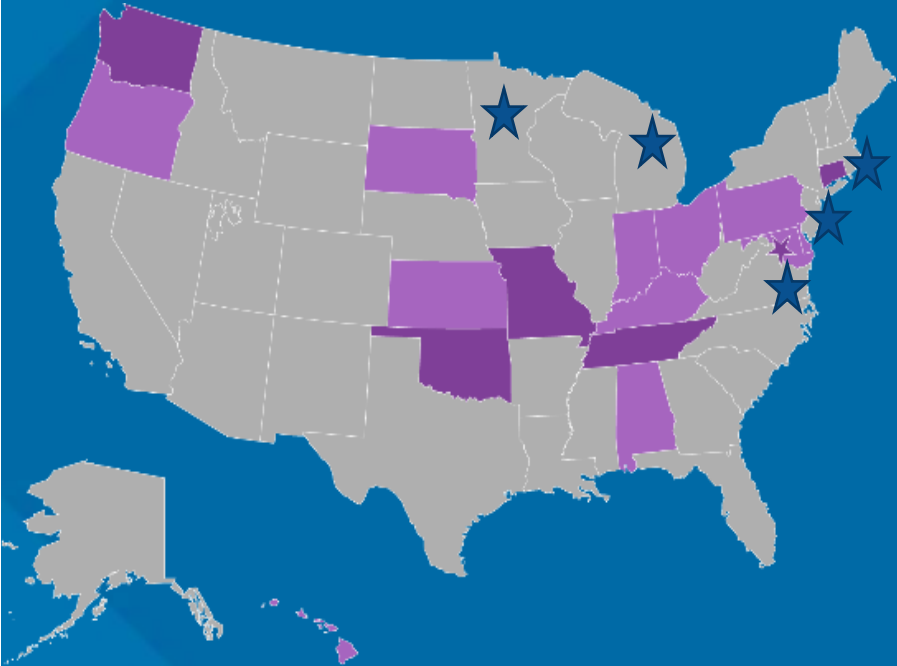
Transitional Change

- "Retooling" the system and its practices to fit the new model

- Mergers, consolidations, reorganizations, revising systematic payment structures,

- Creating new services, processes, systems and products to replace the traditional one
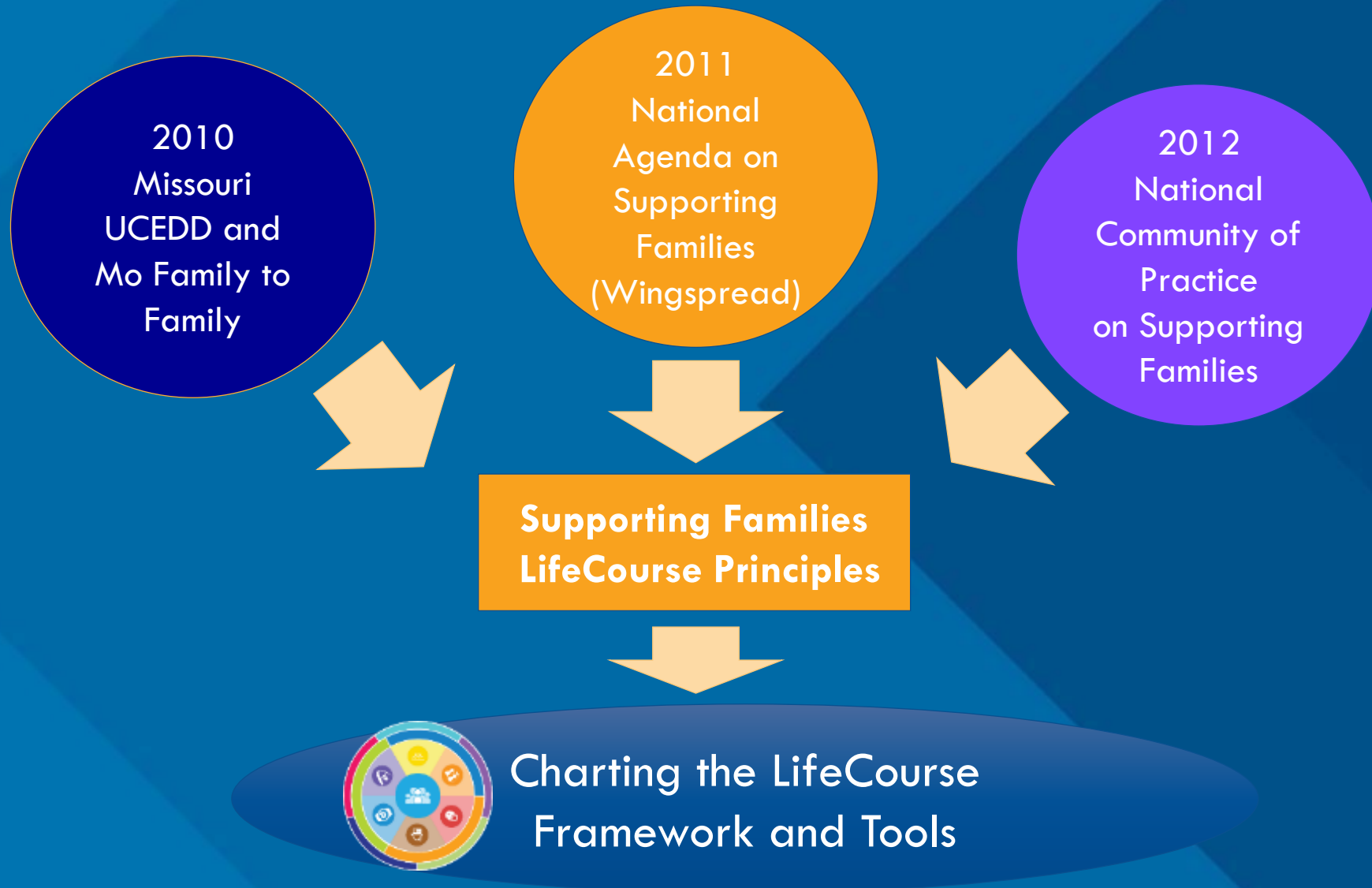
Transformation Change

- Fundamental reordering of thinking, beliefs, culture, relationships, and behavior

- Turns assumptions inside out and disrupts familiar rituals and structures

- Rejects command and control relationships in favor of co-creative partnerships

Creating Blue Space, Hanns Meissner, 2013

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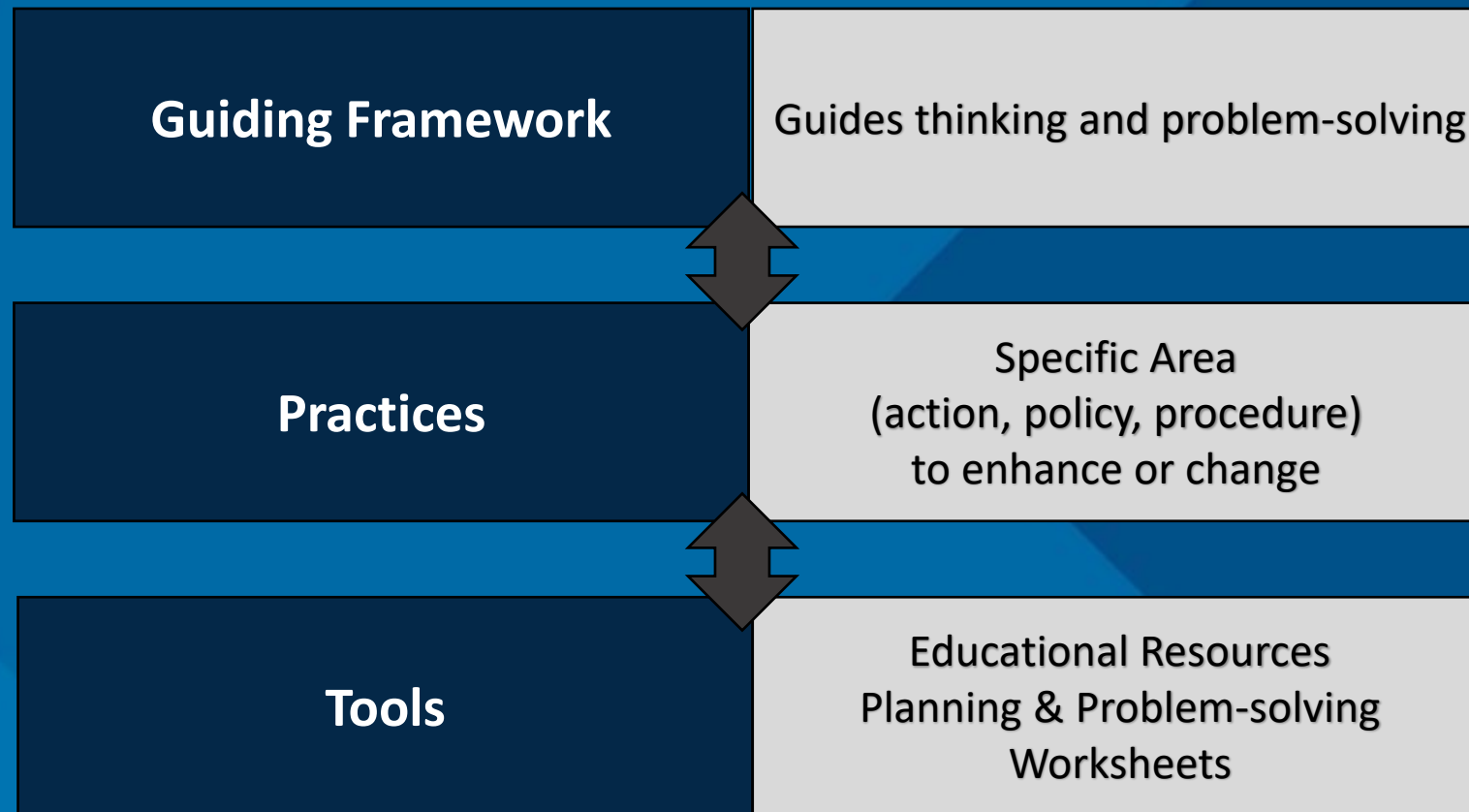Charting the LifeCourse Nexus

Goal of the National CoP

To build capacity, *through a community of practice*, across and within States to create policies, practices and systems to better assist and support families that include a member with an intellectual and developmental disability across the lifespan.

Application of Charting the LifeCourse

Guiding Framework	Guides thinking and problem-solving
Practices	Specific Area (action, policy, procedure) to enhance or change
Tools	Educational Resources Planning & Problem-solving Worksheets

Thinking That Guides the Framework

Core Belief:
All people and their families have the right to live, love, work, play and pursue their life aspirations in their community.

Where do People with ID/DD Live?

4.7 million estimated People with Developmental Disabilities*

75%
3,500,000

Not Known to Services

12%
672,000

Living at Home

11%
528,000
Out of Home Services

RISP.umn.edu
RTC.umn.edu

Larson, S.A., Eschenbacher, H.J., Anderson, L.L., Taylor, B., Pengell, S., Hewitt , A., Sowers, M., & Bourne, M.L. (2017). In-Home and Residential Long-Term Supports and Services for Persons with Intellectual or Developmental Disabilities: Status and trends through 2015. Minneapolis: University of Minnesota, Research and Training Center on Community Living, Institute on Community Integration.

All Individuals Exist in the Context of Family

- Family is defined by the individual
- Individuals and their family may need supports that adjust as roles and needs of all members change
- Not dependent upon where the person lives

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Charting the LifeCourse Nexus
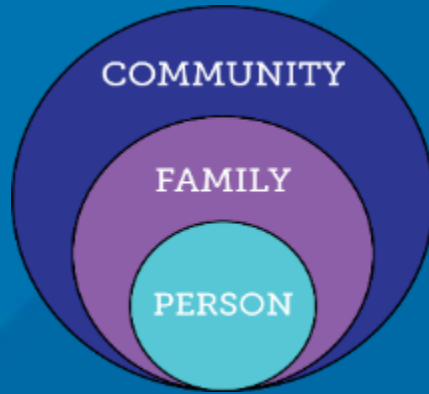
All People Exist Within the Context of Family and Community

♥	Caring About	Affection & Self-Esteem
		Repository of knowledge
		Lifetime commitment
🛡	Caring For	Provider of day-to-day care
		Material/Financial
		Facilitator of inclusion & membership
		Advocate for support

Adapted from Bigby & Fyffe (2012), Dally (1988), Turnbull et all (2011)

Good Life for ALL

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Individuals will achieve self-determination, interdependence, productivity, integration, and inclusion in all facets of community life

Families will be supported in ways that maximize their capacity, strengths, and unique abilities to best nurture, love, and support all individual members to achieve their goals
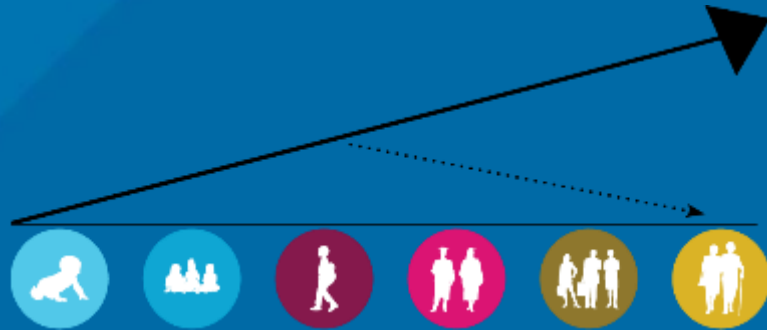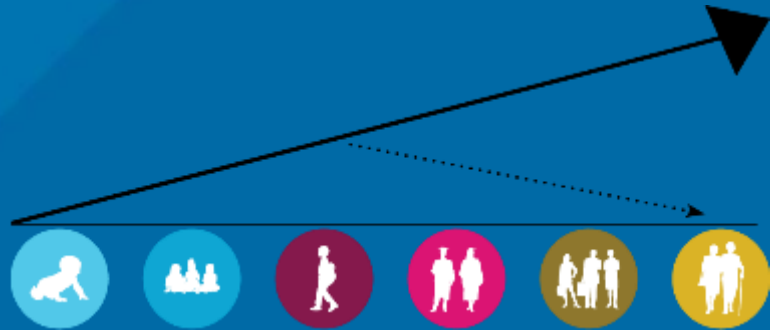
What I Want for Quality of LIFE
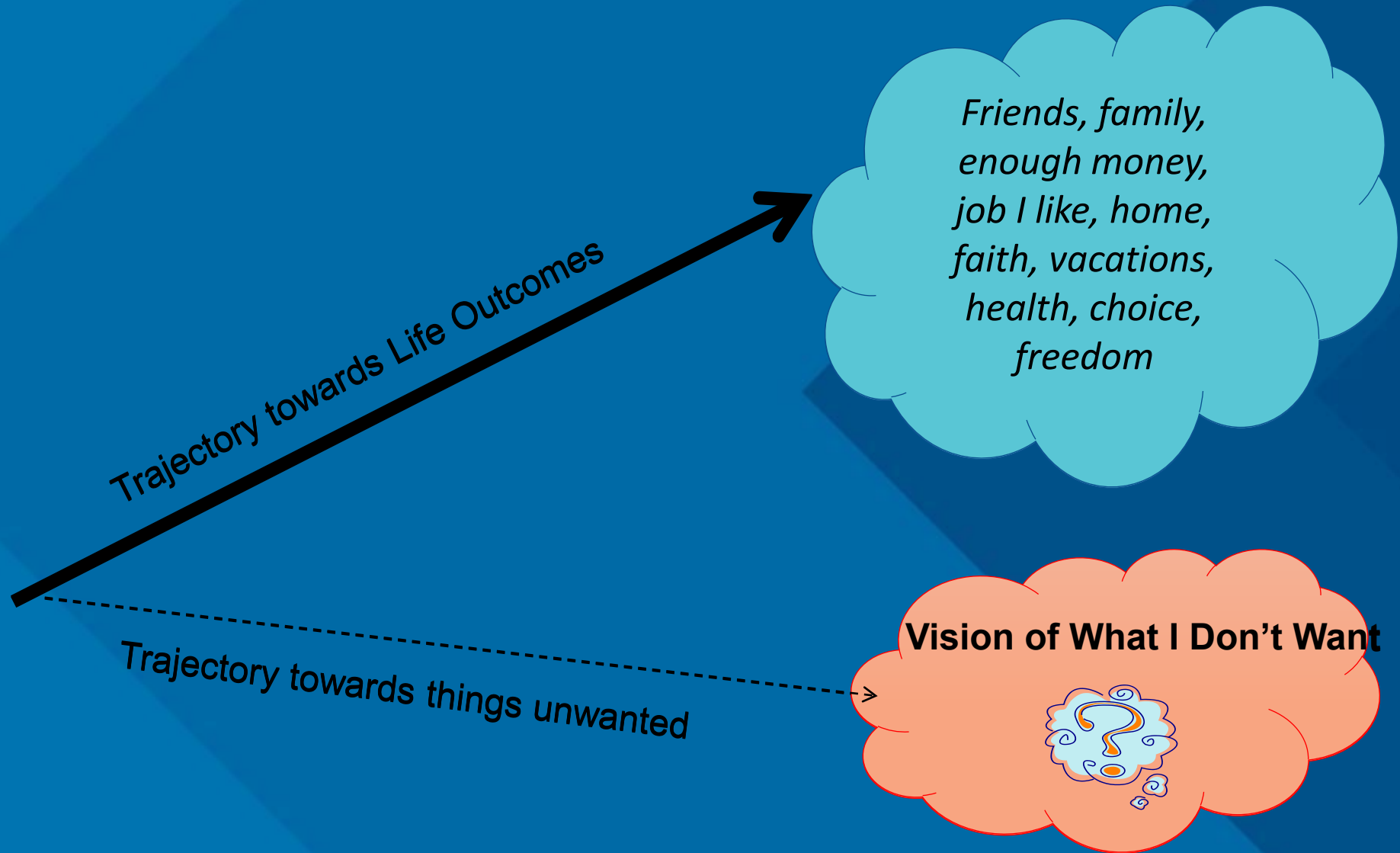
Vision of a Good Life

The future is not something we enter. The future is something that we create. And creating that future requires us to make choices and decisions that begin with a dream

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Charting the LifeCourse Nexus

Vision of a Good Life

Vision of What I Don't Want

Trajectory Towards a Good Life

Friends, family, enough money, job I like, home, faith, vacations, health, choice, freedom

Trajectory towards Life Outcomes

Trajectory towards things unwanted

Vision of What I Don't Want

Life Trajectory Worksheet

Trajectory Towards a Good Life

Anticipatory Guidance & Life Experiences

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Integrated Life Domains

Daily Life and Employment
(school/education, employment, volunteering, routines, life skills)

Community Living
(housing, living options, home adaptations and modifications, community access, transportation)

Social and Spirituality
(friends, relationships, leisure activities, personal networks, faith community)

Healthy Living
(medical, behavioral, nutrition, wellness, affordable care)

Safety and Security
(emergencies, well-being, legal rights and issues, guardianship options and alternatives)

Citizenship and Advocacy
(valued roles, making choices, setting goals, responsibility, leadership, peer support)

Integrated Life Domains

Overarching Area (3 Buckets)	Focus Area of Enhancement	Examples of Services or Supports
Discovery and Navigation	Informational Support Instructional Skills Development Navigation and Advocacy Skills	• Informational Support *(specific disability or health condition, options and possibilities for employment, community living, relationships, recreation, future planning)* • Skill Building Support *(navigating and access services, behavioral supports, medical tasks)* • Interventions that enhance the ability to advocate for services and policy change
Connections and Networking	Emotional Support Affirmational Support Relationships and Social Capital	• Support Groups • Professional Counseling • Peer-to-peer interventions and programs *(Parent-to-Parent, Sib-shops, Self-advocacy organizations)*
Goods and Services	Physical Support Financial Material/Instrumental	• Individual and Family-Directed Supports • Cash Subsidies and Financial assistance • Transportation • Respite/Childcare • Adaptive equipment and Home modifications

Integrated Services and Supports

More than "Natural Supports" and Formal, paid developmental disability services and supports

Integrated Support Star

PERSONAL STRENGTHS & ASSETS

Strengths:
Things a person is good at
or others admire or like

Assets:
Resources that are owned
or can be accessed by the person

Skills:
Personal abilities,
knowledge or experience

TECHNOLOGY

Personal Technology:
Common technologies
used by anyone

Environmental Technology:
Innovative technologies designed
to help a person navigate or
adapt their surroundings

Assistive Technology:
Low-tech or specialized devices
that assist a person with
day-to-day tasks

RELATIONSHIPS

Family:
People that love, and are
committed to each other

Friends:
People that enjoy being together,
have things in common,
and care about each other

Acquaintances:
People that come into
frequent contact with the person
but don't know them well.

INTEGRATED SUPPORTS

COMMUNITY RESOURCES

Places:
Businesses, faith communities,
parks and recreation, health care facilities

Groups:
Civic and membership organizations

Government Resources:
Local services, i.e.: public safety,
legal, social programs

ELIGIBILITY-SPECIFIC SUPPORTS

Disability Specific:
Supports received based on a
diagnosis, ie: Special Education,
Government Funded Disability Supports

Needs-based:
Supports based on age,
gender, geographics, income level
or employment status

Developed by the UMKC Institute for Human Development, UCEDD, July 2016

Integrated Supports and Services

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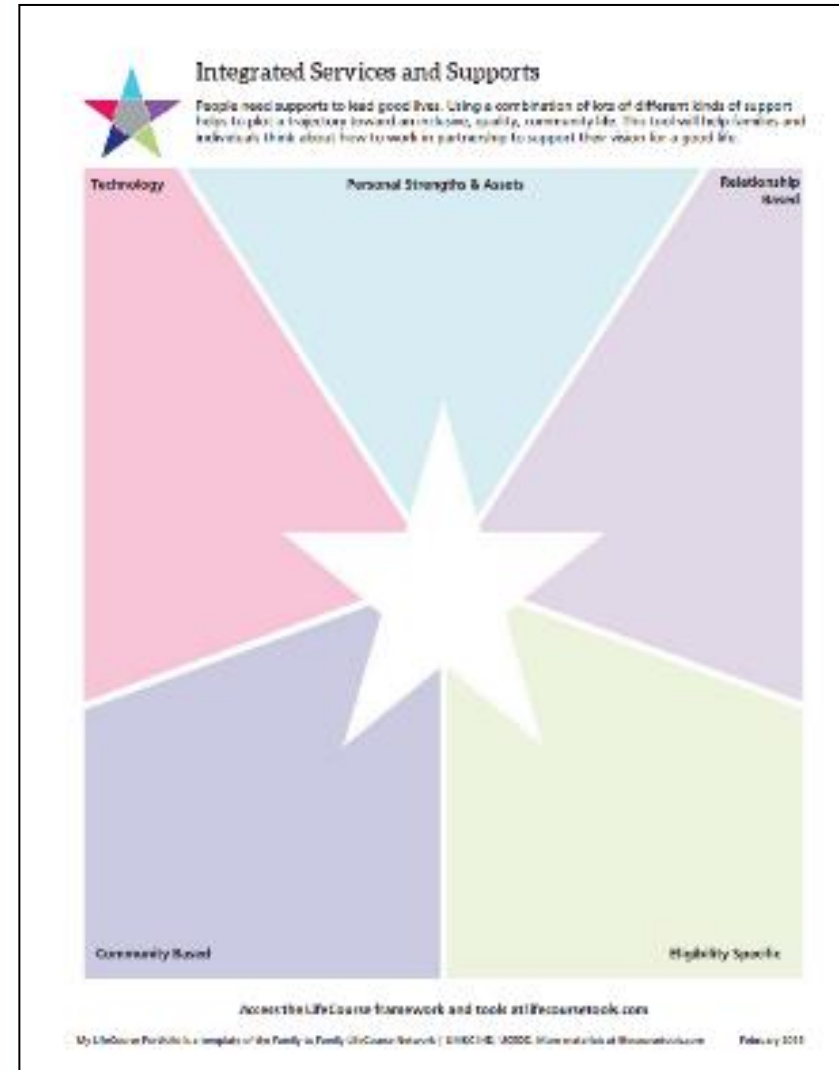
Integrated Support Cheat Sheets
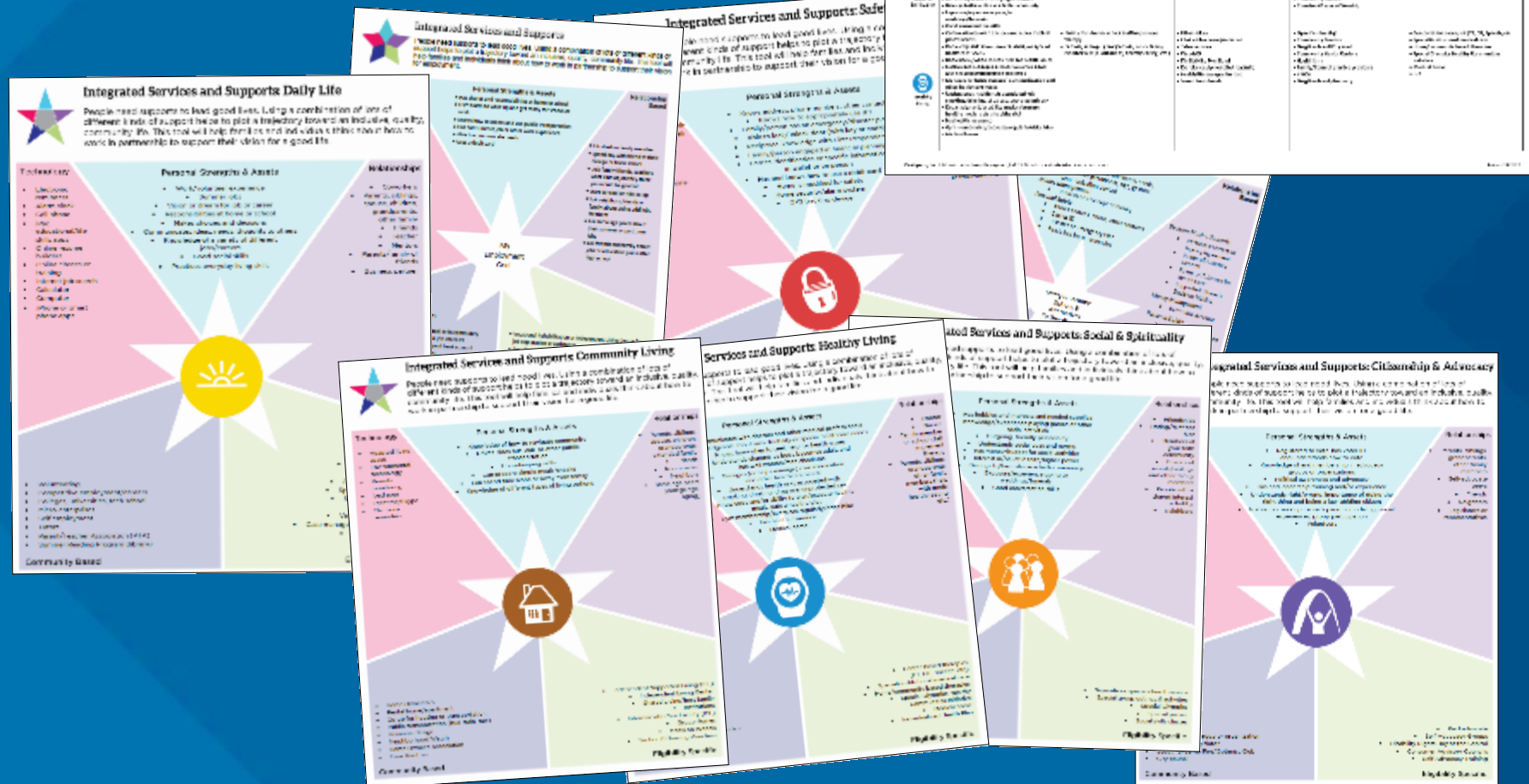
BEFORE: Services and Supports

PERSONAL STRENGTHS & ASSETS

TECHNOLOGY:

RELATIONSHIPS:
Mom, Dad

Ben's Services & Supports

COMMUNITY BASED:

ELIGIBILITY SPECIFIC
DDD Self-Directed waiver PCA staff; Medicaid; Special Needs Trust

Long Term Service and Support Needs

Time	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
6-6:30 AM							
6:30-7 AM							
7-7:30 AM	Parents get Ben out of bed, assist with breakfast, shower, getting dressed and ready for his day						
7:30-8 AM							
8-8:30 AM							Parents are weekend support
8:30-9 AM							
9-9:30 AM							
9:30-10 AM		Waiver Self-Directed PCA					
10-10:30 AM							
10:30-11 AM							
11-11:30 AM							
11:30-12 PM							
12-12:30 PM							
12:30-1 PM							
1-1:30 PM							
1:30-2 PM							
2-2:30 PM							
2:30-3 PM							
3-3:30 PM							
3:30-4 PM							
4-4:30 PM							
4:30-5 PM							
5-5:30 PM							
5:30-6 PM							
6-6:30 PM							
6:30-7 PM	Mom and Dad provide all support, including meals, transportation and support for activities, etc.						
7-7:30 PM							
7:30-8 PM							
8-8:30 PM							
8:30-9 PM							
9-9:30 PM							
9:30-10 PM							
10 PM-6 AM	Mom and Dad are overnight staff						

Template by Missouri Family to Family @ UMKC-IHD, UCEDD   December 2014

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AFTER: Services and Supports

PERSONAL STRENGTHS & ASSETS

Able to stay home alone for up to an hour; has & can use i-pad;

TECHNOLOGY:
i-pad when home alone; digital watch

RELATIONSHIPS:
Mom, Dad, Matt, Zac, Ali, Chad, Ericka, Roy, Carol, Nick, Spohn,

Ben's Services & Supports

COMMUNITY BASED:
Firemen at ESFD; coaches & staff at ES high school; Omni bus;

ELIGIBILITY SPECIFIC
DDD Self-Directed waiver PCA staff; Medicaid; Special Needs Trust

Long Term Service and Support Needs

Time	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
6-6:30 AM	Parents get Ben out of bed, assist with breakfast, shower, getting dressed and ready for his day						
6:30-7 AM							
7-7:30 AM	Parents support Ben						
7:30-8 AM							
8-8:30 AM	Waiver Self-Directed PCA	Volunteers Fire Dept Supported as needed by firemen	Waiver Self-Directed PCA	Volunteers Fire Dept Supported as needed by firemen	Waiver Self-Directed PCA		
8:30-9 AM							
9-9:30 AM							
9:30-10 AM							St. Ann's w/ mom
10-10:30 AM							
10:30-11 AM							
11-11:30 AM							
11:30-12 PM		Waiver Self-Directed PCA		Waiver Self-Directed PCA		Home alone while Mom walks	
12-12:30 PM							
12:30-1 PM							
1-1:30 PM							
1:30-2 PM							
2-2:30 PM							
2:30-3 PM	Volunteer at high school, supported by coaches and friends						
3-3:30 PM							
3:30-4 PM							
4-4:30 PM							
4:30-5 PM							
5-5:30 PM							
5:30-6 PM	WWE With Matt	Mom and/or Dad prepare meal and assist as needed				Dinner w/ Roy & Carol & family	
6-6:30 PM							
6:30-7 PM		Home alone while Mom walks					
7-7:30 PM							
7:30-8 PM		Horseback Therapy w/ Dad				Nick's Birthday Party with Matt and friends	
8-8:30 PM							
8:30-9 PM							
9-9:30 PM							
9:30-10 PM							
10 PM-6 AM	Mom and Dad are overnight staff						

Template by Missouri Family to Family @ UMKC-IHD, UCEDD   January 2015
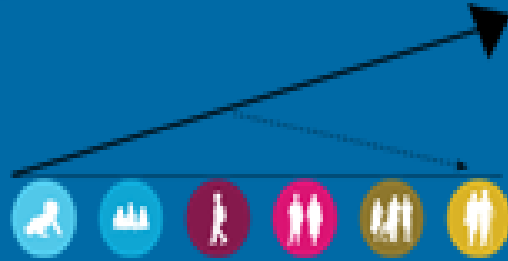
Ben's Life Activities

PERSONAL STRENGTHS & ASSETS

Can stay home alone for up to one hour

TECHNOLOGY:
I-pad to watch WWE network and music videos; facebook

Ben's Life Activities

RELATIONSHIPS:
Mom, Dad, Matt, Zac & Ali; firemen friends; Nick, Spohn, Mike, Ange, Chad, Ericka & twins

COMMUNITY BASED:
Fire Station, Wal-Mart, movies, bowling, Sonic, Price Chopper, Church, High School, IHD

ELIGIBILITY SPECIFIC
Paid staff thru SD waiver help with activities, ADL's & access community; therapeutic riding

CHARTING the life course

Integrated STAR Activities

TIME	MON	TUES	WED	THURS	FRI	SAT	SUN
6-6:30 AM	Breakfast	Breakfast	Breakfast	Breakfast	Breakfast		Spend
6:30-7 AM	I-pad while	I-pad while	I-pad while	i-pad while	I-pad		Night with
7-7:30 AM	Mom walks	Mom walks	Mom walks	Mom walks	Mom walks		Matt
7:30-8 AM							
8-8:30 AM		Volunteer		Volunteer	Workout		
8:30-9 AM		Fire Station		Fire Station	@ Gym		
9-9:30 AM	Go for walk	8-Noon	Buy food	8-Noon	Get ready		
9:30-10 AM			& take to		& go to IHD		
10-10:30 AM	Workout		Good Sam.		Volunteer		Church @
10:30-11 AM	@ Gym		Center		At IHD		St Ann's
11-11:30 AM	Watch TV		Watch TV		with PCA		
11:30-12 PM			Lunch with				
12-12:30 PM	Lunch with	Lunch with	PCA help	Lunch with	Lunch @		
12:30-1 PM	PCA help	Firemen @	Workout	PCA help	Crown Cntr		
1-1:30 PM	Library	El Maguey	@ Gym	Wal-Mart			
1:30-2 PM		Watch TV		With PCA			
2-2:30 PM	Watch TV	& chill until	Sonic drink	Watch TV	Get ready		
2:30-3 PM	& chill	football	Chill time	& chill	for game		
3-3:30 PM	Football	Football	Football	Football	ESHS		
3:30-4 PM	Practice	Practice	Practice	Practice	Tigers		
4-4:30 PM					Football		
4:30-5 PM					Game		
5-5:30 PM						Dinner with	
5:30-6 PM		Go visit				Matt (twin)	
6-6:30 PM		Twins, Chad	McDonalds				Watch
6:30-7 PM		& Ericka in				Music	PayPerView
7-7:30 PM		Lawson				Concert	with
7:30-8 PM	I-pad when	I-pad while	Northland	I-pad while		with Matt	Firemen
8-8:30 PM	Mom walks	Mom walks	Therapeutic	Mom walks			friends
8:30-9 PM			Horseback				
9-9:30 PM			Riding				
9:30-10 PM							
10 PM-6 AM						Spend night with Matt at his apartment	

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Charting the LifeCourse Nexus

Balancing Human and System Needs
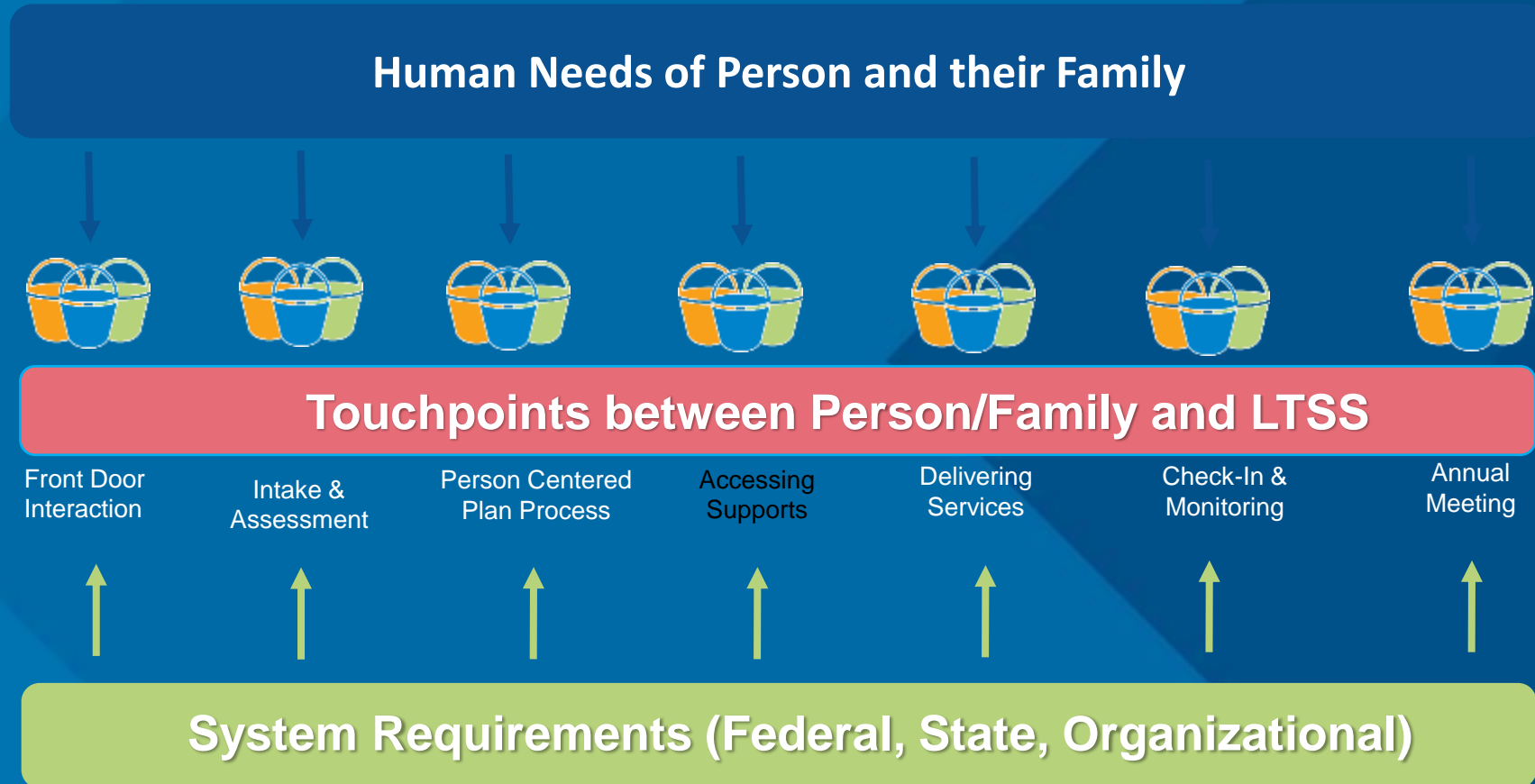
Putting the Framework into Action

Meet Mike…

About Mike

- 16-year-old young man who lives with parents and an older brother
- Attends XYZ high school and attends most general education classes (with the help of class within a class in several classes and one hour in the special education life skills classroom daily)
- Very social and loves being around his friends and classmates.

Interests:

- Mike likes anything and everything sports, especially enjoys football, baseball and basketball.
- Football and basketball manager for his middle school and high school teams.
- Wishes he could play on the HS sports teams but he doesn't have the skill level or endurance needed.

Health:

- Mike gets tired if he is on his feet for too long, and does best when he can sit down frequently
- His mom says she doesn't know if he has the endurance to work an 8-hour day.
- He has cerebral palsy and intellectual/developmental disability

Employment:

- When asked what kind of job he is interested in, he says he hopes he can someday work at Royals stadium. His mom reports he gets excited watching the Royals grounds crew before and during games
- Mike's parents would love to see him employed as an adult, but they have no ideas about what is possible or what kind of a job would suit Mike

Discovering Who

- Adapted from The Learning Community for Person Centered Practices and Helen Sanderson Associates

- to learn more: http://helensandersonassociates.co.uk/person-centred-practice/one-page-profiles/one-page-profile-templates/

Charting the LifeCourse Portfolio: Exploring

Name: _____

What Do People Like and Admire About Me?

- List positive strengths, talents and qualities.
- Ask family or others who know you well for input

What Is Important to Me?

- People, places & things important to you.
- Hobbies, possessions, rituals, routines, family culture.
- What do you value most?

What Are The Best Strategies To Support Me?

- Specific kinds of support that are helpful, and what is not.
- Support you need to create the best environment and outcomes in your life.
  - What is your preferred learning style?
  - What keeps you motivated?
  - How are you best encouraged?

1. Describe Mike's vision for overall "Good Life"

2. Then list what is not wanted
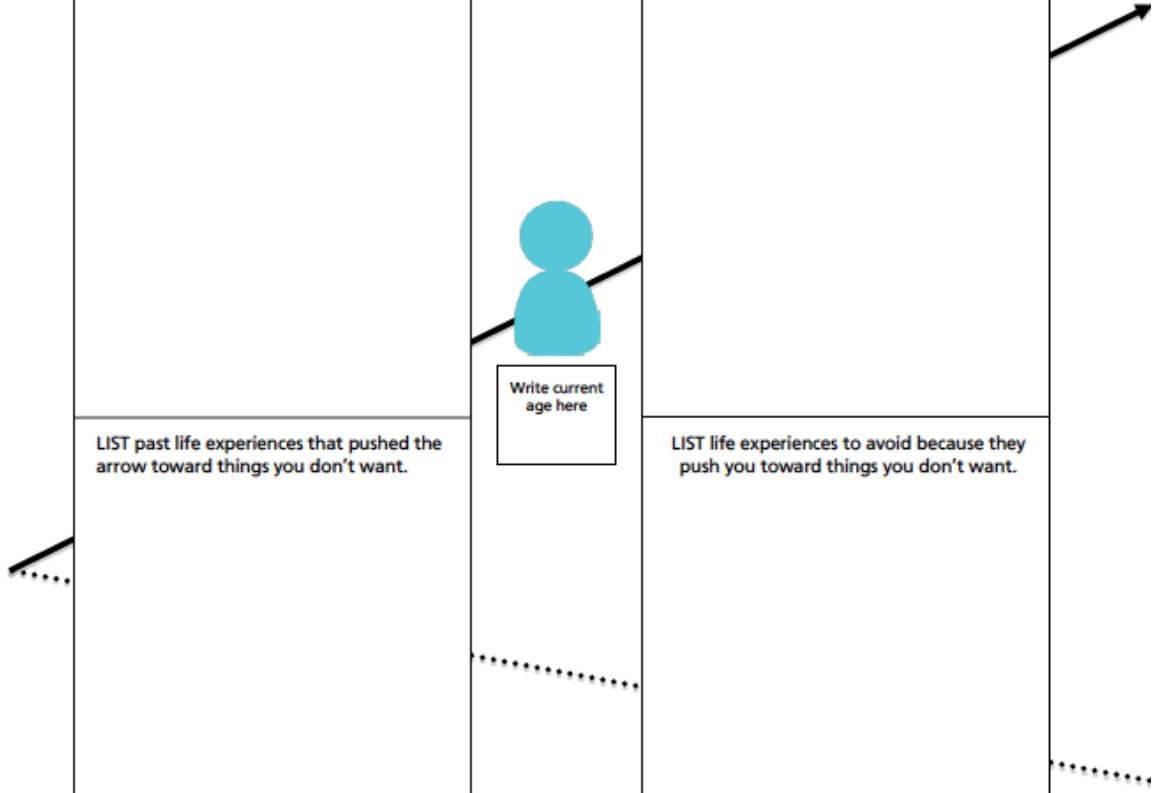
VISION for a GOOD LIFE

LIST what you want your "good life" to look like ...

What I DON'T Want

LIST the things you don't want in your life...

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Charting the LifeCourse Nexus

3. Current age

4. Past life experiences (positive or negative impact on trajectory)

5. Life experiences moving forward to try or avoid

Life Trajectory Worksheet

Past Life Experiences
LIST past life experiences and events that supported your vision for a good life.

Future Life Experiences
LIST current/ future life experiences that continue supporting your good life vision.

Write current age here

LIST past life experiences that pushed the arrow toward things you don't want.

LIST life experiences to avoid because they push you toward things you don't want.

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Discovering How

Personal Strengths & Assets
resources, skills, abilities characteristics

Technology
i-pad/smart phone apps, remote monitoring, cognitive accessibility, Adaptive equipment

Relationships
family, friends, neighbors, co-workers, church members, community members

Community Based
school, businesses, church faith based, parks & rec, public transportation

Eligibility Specific
SHS services, Special Ed, Medicaid, Voc Rehab, Food Stamps, Section 8

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Discovering Who

Our Responses...

Charting the LifeCourse Portfolio: Exploring

Name: _____

What Do People Like and Admire About Me?

- Social and friendly
- Helpful and enthusiastic

What Is Important to Me?

- Family and friends
- Sports!

What Are The Best Strategies To Support Me?

- Make sure I am connected with friends and peers
- I need to sit or be able to take frequent breaks

This page is a derivative of Person Centered Planning One Page Profiles

May 2017

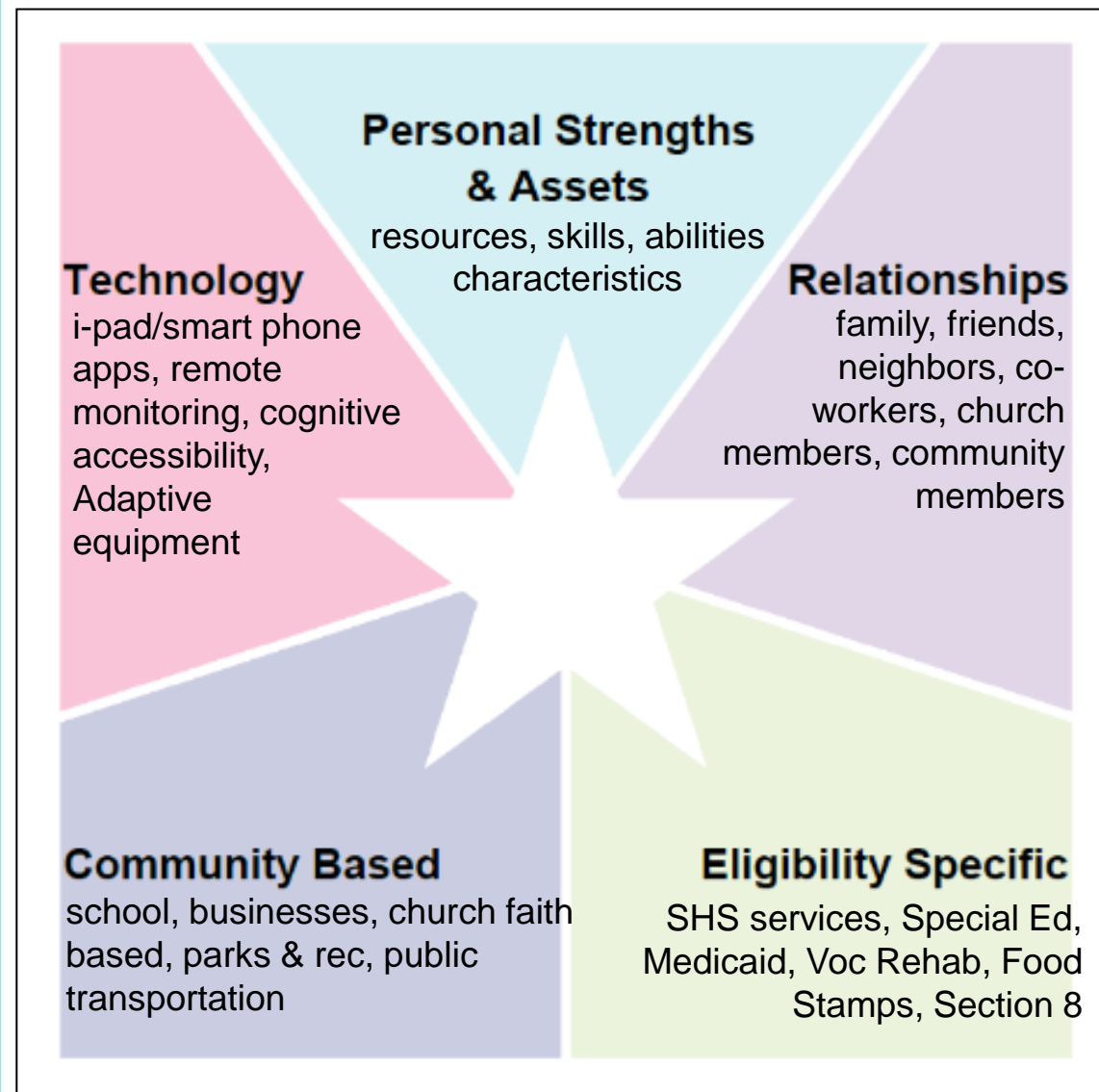# Life Trajectory Worksheet

Past Life Experiences
LIST past life experiences and events that supported your vision for a good life.

- Living with mom/dad/brother who are supportive of interests
- Included in general ed classes with peers, with adaptations and accommodations
- Manager for MS/HS Football and basketball teams
- Attended/watched a lot of sports

LIST past life experiences that pushed the arrow toward things you don't want.

- Not able to play organized sports in school (so far)
- Getting tired/can't stand for a long time

Future Life Experiences
LIST current/ future life experiences that continue supporting your good life vision.

- Explore working with HS grounds keepers and/or other sports related positions?

LIST life experiences to avoid because they push you toward things you don't want.

- Jobs/experiences where can't sit or take breaks to rest
- Job related experiences that don't relate back to sports

16

VISION for a GOOD LIFE
LIST what you want your "good life" to look like …

- Being connected to family (mom, dad, brother)
- Being around friends and classmates
- SPORTS (football, baseball, basketball)
- Playing on the High School sports teams
- Working at Royals Stadium
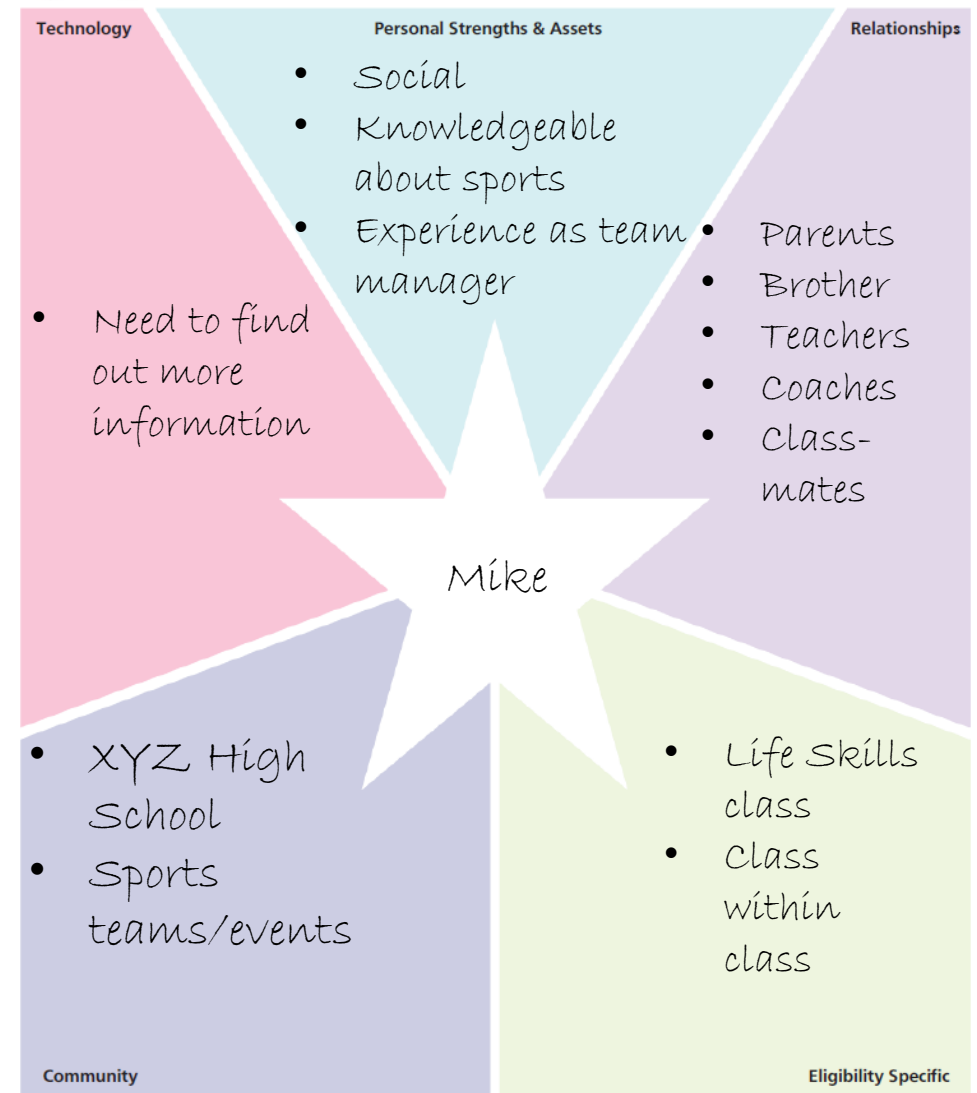
What I DON'T Want
LIST the things you don't want in your life…

- Being excluded from social and school activities with classmates
- Being unable to participate/watch sports

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Discovering How

Charting the LifeCourse Integrated Supports Star: Mapping

Technology
- Need to find out more information

Personal Strengths & Assets
- Social
- Knowledgeable about sports
- Experience as team manager

Relationships
- Parents
- Brother
- Teachers
- Coaches
- Class-mates

Mike

Community
- XYZ High School
- Sports teams/events

Eligibility Specific
- Life Skills class
- Class within class

Access the LifeCourse framework and tools at lifecoursetools.com

My LifeCourse Portfolio is a template of the UMKC IHD, UCEDD. More materials at lifecoursetools.com

OCTOBER 2016

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Tips and Tricks

- You don't have to FILL THE PORTFOLIO OUT in front of person/family
- The Portfolio doesn't have to be completed in order - from front to back if it doesn't make sense for a particular person or circumstance (find what works best for your style and the person you are working with)
- Could use Portfolio to take notes as you have a conversation
- Don't have to "fill out" the entire portfolio – do what makes sense
- Sometimes you just use the framework to have conversations
- Could give it (in person or send ahead of time) to the person/family and ask them to look it over and get back with you to discuss

Using CtLC to Implement and Monitor Goals/Objectives

Achieving our Goals…

- Define expected success (3 stars) for a healthy living goal
- Describe what exceeding success (4 or 5 stars) and minimum success (1 or 2 stars) looks like
- Explore strategies and supports for success
- Reflect on what's working/barriers to success in meeting goals

Goal Attainment Tool

- **Step 1: Decide on a Goal**

- **Step 2: Define what Success looks like**

- Step 3: Define Strategies to that will help you reach the goal

- Step 4: Describe the Integrated Supports who can help you practice the strategies

CHARTING the LifeCourse

GOAL ATTAINMENT: Planning and Tracking Success

GOAL:

DEFINE SUCCESS	Success Scale						Successes: *What's Working*
Describe what EXCEEDS expected success would look like for this goal:	★★★ ★★						
	★★ ★★						
Describe what EXPECTED SUCCESS looks like for this goal:	★★★						Barriers and Challenges: *What's NOT Working*
Describe what MINIMUM success would look like for this goal:	★ ★						
	★						

STRATEGIES	SUPPORTS	START DATE	TARGET END DATE

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Life Trajectory Worksheet

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Mike's Goal Attainment Sheet

Step 1: Decide on a Goal

Goals are part of our Vision for a Good Life

CHARTING the LifeCourse

GOAL ATTAINMENT: Planning and Tracking Success

GOAL: *Mike will gain work experience in a sports related field*

DEFINE SUCCESS	Success Scale							Successes: *What's Working*
Describe what EXCEEDS expected success would look like for this goal:	⭐⭐⭐ ⭐⭐							
	⭐⭐ ⭐⭐							
Describe what EXPECTED SUCCESS looks like for this goal:	⭐⭐⭐							Barriers and Challenges: *What's NOT Working*
Describe what MINIMUM success would look like for this goal:	⭐ ⭐							
	⭐							

Mike's Definition of Success

Step 2: Define Success

- Sometimes, success means that we have reached our goal… what would that look like?

- Sometimes, success means that we are actively working on our goal… what would that look like?

Success means doing things that will help me reach my goal.

CHARTING the LifeCourse

GOAL ATTAINMENT: Planning and Tracking Success

GOAL: *Mike will gain work experience in a sports related field*

DEFINE SUCCESS	Success Scale						Successes: *What's Working*
Describe what EXCEEDS expected success would look like for this goal: Mike will have 1 or more paid work experiences	⭐⭐⭐ ⭐⭐						
	⭐⭐ ⭐⭐						
Describe what EXPECTED SUCCESS looks like for this goal: Mike will volunteer in 3 settings	⭐⭐⭐						Barriers and Challenges: *What's NOT Working*
Describe what MINIMUM success would look like for this goal: Mike will shadow at least 1 setting	⭐ ⭐						
	⭐						

STRATEGIES		SUPPORTS	START DATE	TARGET END DATE

Mike's Strategies

- How will you be successful?

- What can you do?

- When will you do it?

- Where will you do it?

- How often will you do it?

- Who can help you?

- What do you need to do?

Success means doing things that will help me reach my goal.

CHARTING the LifeCourse

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Describe what MINIMUM success would look like for this goal: Mike will shadow at least 1 setting	⭐⭐ ⭐						

STRATEGIES	⭐ SUPPORTS	START DATE	TARGET END DATE
Shadow grounds crew			
Identify other potential positions to shadow			
Shadow in additional positions of interest			

Identify Supports

What supports can be leveraged for action strategies?

Using Integrated Supports helps me to do things that make me successful.

Charting the LifeCourse Integrated Supports Star: Mapping

Technology
- Need to find out more information

Personal Strengths & Assets
- Social
- Knowledgeable about sports
- Experience as team manager

Relationships
- Parents
- Brother
- Teachers
- Coaches
- Class-mates

Mike

Community
- XYZ High School
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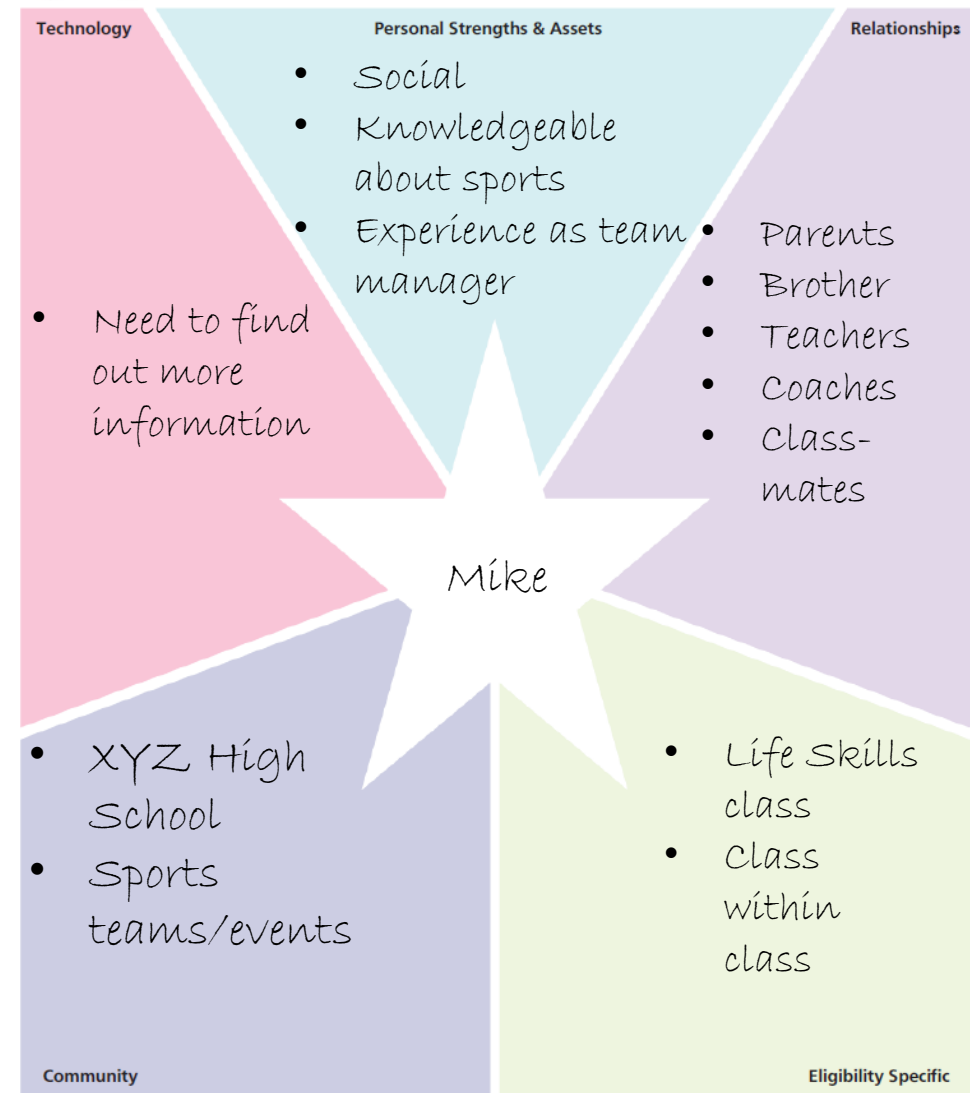
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	⭐⭐ ⭐⭐						
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Describe what MINIMUM success would look like for this goal: Mike will shadow at least 1 setting	⭐ ⭐						
	⭐						

STRATEGIES	⭐ SUPPORTS	START DATE	TARGET END DATE
Shadow grounds crew	XYZ High School		
Identify other potential positions to shadow	Job Skills Class		
Shadow in additional positions of interest	Coaches		

Developed by the UMKC Institute for Human Development, UCEDD | More tools and resources at lifecoursetools.com   Updated DEC 2016

Tracking Success

CHARTING the LifeCourse

GOAL ATTAINMENT: Planning and Tracking Success

GOAL: Mike will gain work experience in a sports related field

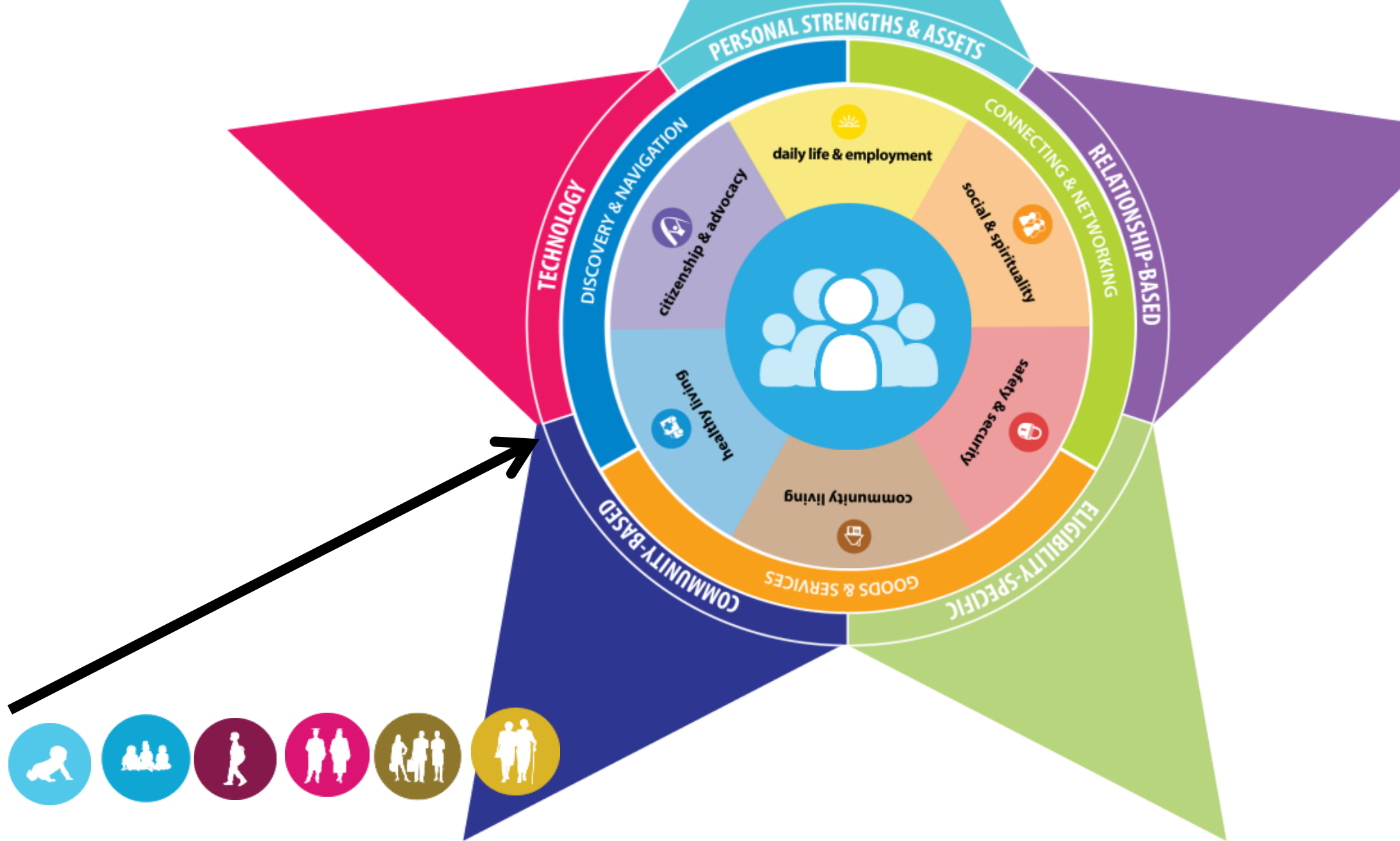| DEFINE SUCCESS	Success Scale						
Describe what EXCEEDS expected success would look like for this goal: Mike will have 1 or more paid work experiences	⭐⭐⭐ ⭐⭐						
	⭐⭐ ⭐⭐						
Describe what EXPECTED SUCCESS looks like for this goal: Mike will volunteer in 3 settings	⭐⭐⭐		14				
Describe what MINIMUM success would look like for this goal: Mike will shadow at least 1 setting	⭐ ⭐	11	21				
	⭐	5					

Successes: What's Working
5: Shadow at ABC Park – loved the mower
21: shadowed Master Gardner – enjoyed spreading mulch

Barriers and Challenges: What's NOT Working
14: Volunteered at Boys and Girls club – did not enjoy basketball

STRATEGIES	⭐ SUPPORTS	START DATE	TARGET END DATE
Shadow grounds crew	XYZ High School		
Identify other potential positions to shadow	Job Skills Class		
Shadow in additional positions of interest	Coaches		

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PERSONAL STRENGTHS & ASSETS

TECHNOLOGY

DISCOVERY & NAVIGATION

CONNECTING & NETWORKING

RELATIONSHIP-BASED

COMMUNITY-BASED

GOODS & SERVICES

ELIGIBILITY-SPECIFIC

daily life & employment

social & spirituality

citizenship & advocacy

safety & security

healthy living

community living

Comprehensive, Integrated & Coordinated Across All Life Domains and Stages

Pediatrician, Families and Friends, Faith based

IDEA Part C, Parents as Teachers, Health, Headstart

School, Special Education, Health, Recreation

Vocational Rehab, Health, Employment, College, Military

Disability Services, Health, Housing, College, Careers
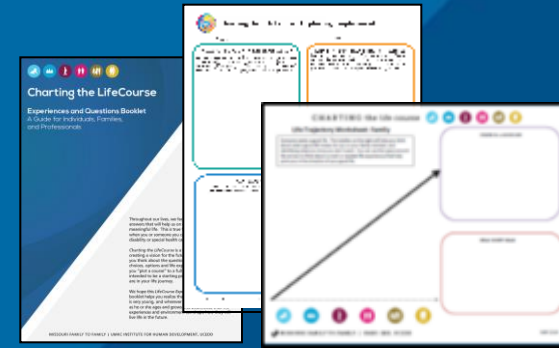
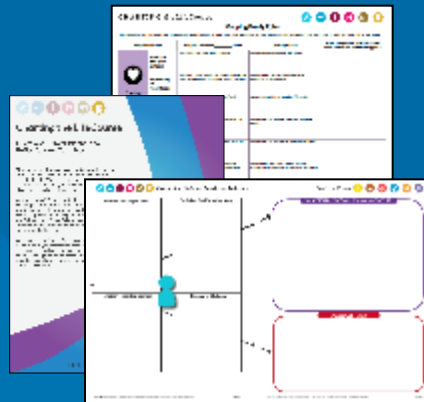Retirement, Aging System, Health

Tools for All Team Members

**Planning for Life Outcomes
and/or
Service Planning**

Self-Advocate
Tools & Resources

Family Perspective
Tools

Formal Planning
Tools and Forms

Vision for a Person Centered System

VISION for a GOOD LIFE

LIST what you want your "good life" to look like ...

What I DON'T Want

LIST the things you don't want in your life...

In the RIGHT box... write what you DON'T want for DSPD

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ASSET MAPPING AND COMMUNICATIONS STRATEGY

Communication Plan:
Our Guiding Principles (1 of 2)

- We believe that "least restrictive" setting is the right place for all individuals to live, regardless if one has a disability or not.

- We believe that individuals and families, once educated, will see the opportunities afforded to them through the HCBS Setting Rule.

- We believe families deserve to be together and to make choices.

- We believe individuals should be given more opportunities to live, work, and socialize within the communities they live as a result of our HCHS Setting changes.

Communication Plan:
Our Guiding Principles (2 of 2)

- We understand that many people feel comfortable where they live and want to stay there; our policies and practices needs to respect all informed choices.

- We understand it is our responsibility to get all stakeholders to the table, informing them of the HCBS Settings Rule and engaging them in systems change.

- We believe the HCBS Settings Rule will inform and enhance our existing system of support, leading to enhanced quality of life of those we support.

Communication Plan:
Our Short-Term Goals

- Educate service users, families, self-advocates, advocates, providers, and state agency partners about the HCBS Settings Rule and the re-design process.

- Provide concrete strategies for service users, self-advocates, and families to be the driving force in the redesign process.

- Support providers to understand the opportunities afforded to them under the HCBS Settings Rule.

- Provide concrete strategies to support providers to become compliant with the HCBS Settings Rule.

Communication Plan:
Some Obstacles to Communication

- This topic does not impact me

- I don't have anything to give to this process

- I don't have internet

- This information is too complicated

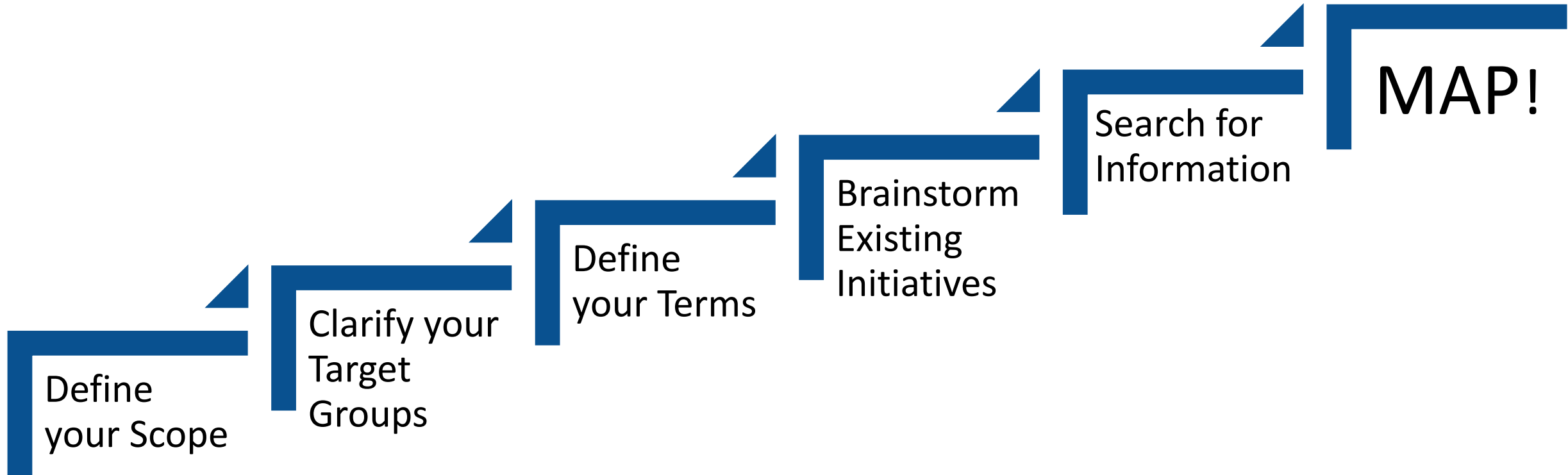- I need help accessing this information, but you don't know how to help me

Communication Plan:
Our Methods

How should we communicate with stakeholders about the HCBS Settings Rule and Future Systems Change Needs?

Stakeholder Engagement Asset Mapping

- Engagement often already happening, but knowledge of what is occurring and who is leading is not known system-wide

- Asset Mapping allows you to take a 'snapshot' of your system and engagement efforts

- Asset Mapping includes both written and visual displays of your existing stakeholder engagement assets

- Asset Mapping informs steps required to improve engagement methods while also building on the resources already in place

Asset Mapping Process

Define your Scope

Clarify your Target Groups

Define your Terms

Brainstorm Existing Initiatives

Search for Information
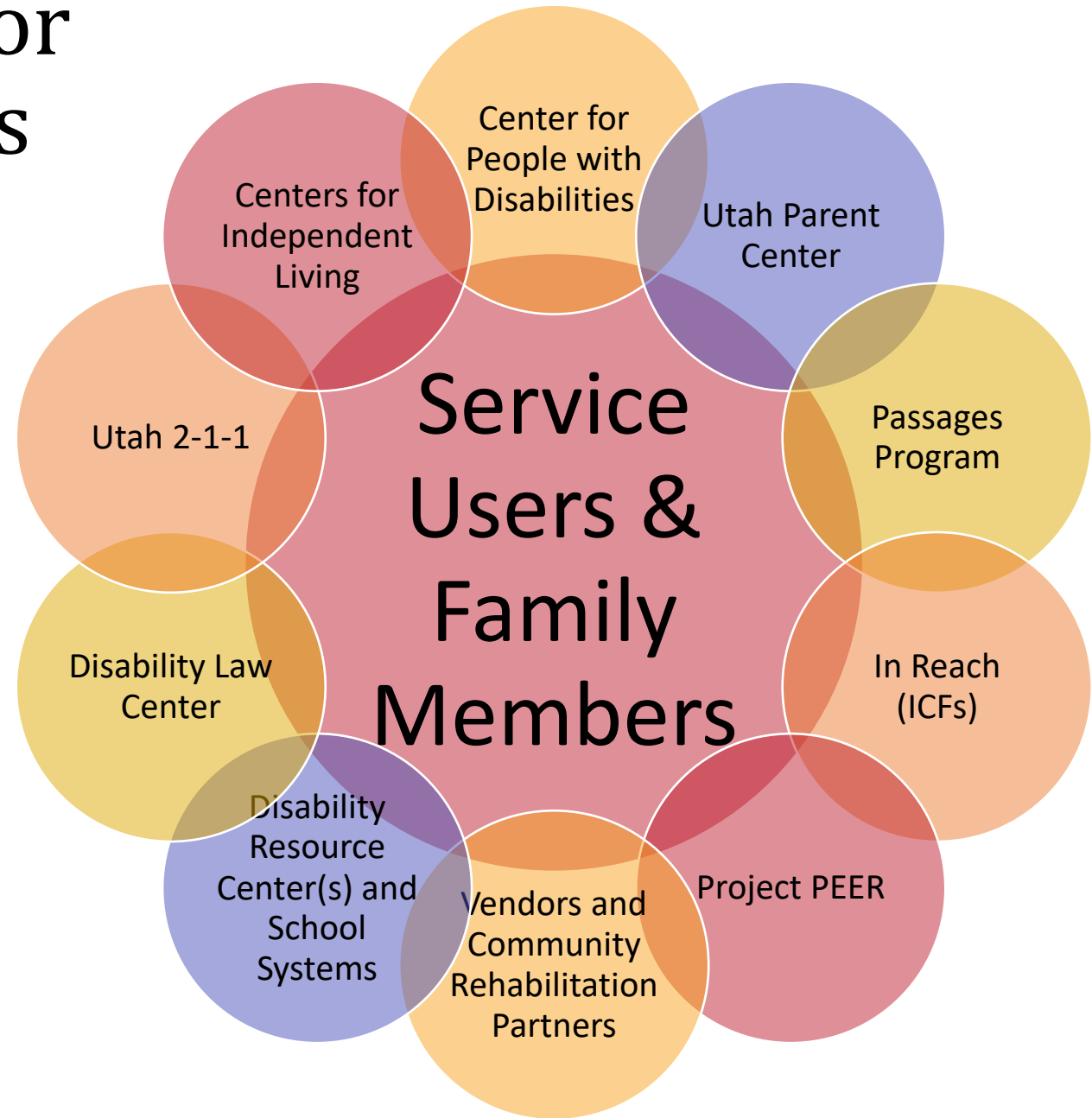
MAP!

Our Asset Mapping Focus

We want to…

- Understand our existing strategies to engage service users, self advocates, family members, and advocates.

- Focus on individuals who are accessing or would like to access home and community-based services through Medicaid Waivers, including individuals who are living in Intermediate Care Facilities (ICFs).

Our Asset Mapping Focus

Clarifying our Target Groups
Service Users
Family Members
Self Advocates
Advocates

Sample of our Assets for Engaging Service Users & Family

- *What Disability Groups are Not Well Represented in this Visual?*

- *Can you think of other Assets to add?*

Service Users & Family Members

Center for People with Disabilities

Utah Parent Center

Centers for Independent Living

Passages Program

Utah 2-1-1

In Reach (ICFs)

Disability Law Center

Project PEER

Disability Resource Center(s) and School Systems

Vendors and Community Rehabilitation Partners

Sample of our Assets for Engaging Self Advocates

- *What Disability Groups are Not Well Represented in this Visual?*

- *Can you think of other Assets to add?*

Sample of our Assets for Engaging Advocates

- *What Disability Groups are Not Well Represented in this Visual?*

- *Can you think of other Assets to add?*

Vision for Provider's Role

VISION for a GOOD LIFE

LIST what you want your "good life" to look like …

In the RIGHT box… write what you want for providers

What I DON'T Want

LIST the things you don't want in your life…
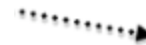
BREAK

Please put your post-its on the Asset Map Papers around the room.

Reflections and Questions

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Aha! Moments

- What is one thing you can do in your own life or role?

- What is one thing your organization can do?

- What is one change you would like to see at the system level?

Jennifer "Jenny" Turner, LCSW
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Lifecoursetools.com

Thank you.
Stay in touch at https://ncapps.acl.gov

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